

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF PUERTO RICO**

IN RE	*	BKRTCY. NO. 21-02253/EAG
ROSA DE LOS SANTOS POLANCO	*	CHAPTER 13
xxx-xx-7506	*	
<u>DEBTOR</u>		

**DEBTOR'S NOTICE OF FILING OF AMENDED SCHEDULES "I" and "J"  
OFFICIAL FORMS 106I & 106J**

**TO THE HONORABLE COURT:**

COMES NOW, ROSA DE LOS SANTOS POLANCO, the Debtor in the above captioned case, through the undersigned attorney, and very respectfully states and prays as follows:

- 1.The Debtor is hereby submitting *Amended Schedules "I" and "J"*, dated October 25, 2021, herewith and attached to this motion.
- 2.The amended Schedules "I" and "J" is filed **to inform the Debtor's actual income and expenses, in the above captioned case.**

**NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)**

Within thirty (30) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

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Notice of Amended Schedules "I" & "J"  
Case no. 21-02253/EAG13

**CERTIFICATE OF SERVICE**

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 13 Trustee, the US Trustee's Office, and all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the debtors and to all creditors and interested parties appearing in the master address list, hereby attached.

**RESPECTFULLY SUBMITTED.** In San Juan, Puerto Rico, this 25th day of October, 2021.

**/s/Roberto Figueroa Carrasquillo**  
USDC #203614  
RFIGUEROA CARRASQUILLO LAW OFFICE PSC  
ATTORNEY FOR the DEBTOR  
PO BOX 186 CAGUAS PR 00726  
TEL NO 787-744-7699/787-963-7699  
Email: [rfc@rfigueroalaw.com](mailto:rfc@rfigueroalaw.com)

Fill in this information to identify your case:

Debtor 1 ROSA DE LOS SANTOS POLANCO

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION

Case number 3:21-bk-2253  
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

☐ Employed

☒ Not employed

Debtor 2 or non-filing spouse

☐ Employed

☒ Not employed

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$ 0.00 \$ 0.00

3. +\$ 0.00 +\$ 0.00

4. \$ 0.00 \$ 0.00



Debtor 1 **DE LOS SANTOS POLANCO, ROSA**

Case number (if known) **3:21-bk-2253**

	For Debtor 1	For Debtor 2 or non-filing spouse
4. <b>Copy line 4 here</b>	\$ 0.00	\$ 0.00
5. <b>List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	\$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	\$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	\$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	\$ 0.00	\$ 0.00
5e. Insurance	\$ 0.00	\$ 0.00
5f. Domestic support obligations	\$ 0.00	\$ 0.00
5g. Union dues	\$ 0.00	\$ 0.00
5h. Other deductions. Specify:	\$ 0.00	\$ 0.00
6. <b>Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	\$ 0.00	\$ 0.00
7. <b>Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	\$ 0.00	\$ 0.00
8. <b>List all other income regularly received:</b>		
8a. <b>Net income from rental property and from operating a business, profession, or farm</b> Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$ 0.00	\$ 0.00
8b. <b>Interest and dividends</b>	\$ 0.00	\$ 0.00
8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b> Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$ 0.00	\$ 0.00
8d. <b>Unemployment compensation</b>	\$ 0.00	\$ 0.00
8e. <b>Social Security</b>	\$ 892.50	\$ 1,015.00
8f. <b>Other government assistance that you regularly receive</b> Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	\$ 0.00	\$ 0.00
8g. <b>Pension or retirement income</b>	\$ 0.00	\$ 0.00
8h. <b>Other monthly income.</b> Specify:	\$ 0.00	\$ 0.00
9. <b>Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	\$ 892.50	\$ 1,015.00
10. <b>Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 892.50 + \$ 1,015.00 = \$ 1,907.50	
11. <b>State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		\$ 0.00
12. <b>Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		\$ 1,907.50 Combined monthly income
13. <b>Do you expect an increase or decrease within the year after you file this form?</b> <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: Debtor will begin to receive social security benefits in the month of November 2021.		

Fill in this information to identify your case:

Debtor 1 ROSA DE LOS SANTOS POLANCO

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN  
DIVISION

Case number 3:21-bk-2253  
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

Official Form 106J

**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

Do not state the dependents names.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$ 0.00

4b. \$ 0.00

4c. \$ 177.00

4d. \$ 0.00

5. \$ 0.00



Debtor 1 **DE LOS SANTOS POLANCO, ROSA**

Case number (if known) **3:21-bk-2253**

<b>6. Utilities:</b>	
6a. Electricity, heat, natural gas	6a. \$ <u>170.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>33.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>240.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>
<b>7. Food and housekeeping supplies</b>	7. \$ <u>556.00</u>
<b>8. Childcare and children's education costs</b>	8. \$ <u>0.00</u>
<b>9. Clothing, laundry, and dry cleaning</b>	9. \$ <u>0.00</u>
<b>10. Personal care products and services</b>	10. \$ <u>50.00</u>
<b>11. Medical and dental expenses</b>	11. \$ <u>125.00</u>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>100.00</u>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <u>0.00</u>
<b>14. Charitable contributions and religious donations</b>	14. \$ <u>65.00</u>
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>271.50</u>
15c. Vehicle insurance	15c. \$ <u>0.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
<b>17. Installment or lease payments:</b>	
17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ <u>0.00</u>
<b>19. Other payments you make to support others who do not live with you.</b> Specify: _____	\$ <u>0.00</u>
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>
<b>21. Other:</b> Specify: _____	21. +\$ <u>0.00</u>
<b>22. Calculate your monthly expenses</b>	
22a. Add lines 4 through 21.	\$ <u>1,787.50</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>0.00</u>
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>1,787.50</u>
<b>23. Calculate your monthly net income.</b>	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>1,907.50</u>
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>1,787.50</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ <u>120.00</u>
<b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input type="checkbox"/> No.	
<input checked="" type="checkbox"/> Yes.	Explain here: <u>NONE</u>

Fill in this information to identify your case:			
Debtor 1	<u>ROSA DE LOS SANTOS POLANCO</u>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>DISTRICT OF PUERTO RICO, SAN JUAN DIVISION</u>		
Case number (if known)	<u>3:21-bk-2253</u>		

☐ Check if this is an amended filing

Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X Rosa De los Santos Polanco  
ROSA DE LOS SANTOS POLANCO  
Signature of Debtor 1

Date 10.25.2021

X \_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_

Label Matrix for local noticing  
0104-3  
Case 21-02253-EAG13  
District of Puerto Rico  
Old San Juan  
Mon Oct 25 13:14:20 AST 2021  
Capital One Bank (USA), N.A.  
by American InfoSource as agent  
PO Box 71083  
Charlotte, NC 28272-1083

US Bankruptcy Court District of P.R.  
Jose V Toledo Fed Bldg & US Courthouse  
300 Recinto Sur Street, Room 109  
San Juan, PR 00901-1964

Banco Popular de Puerto Rico  
Bankruptcy Department  
PO Box 366818  
San Juan, PR 00936-6818

Empresas Berrios Inc  
PO Box 674  
Cidra, PR 00739-0674

FIRST BANK  
CONSUMER SERVICE CENTER  
BANKRUPTCY DIVISION (CODE 248)  
PO BOX 9146 SAN JUAN PR 00908-0146

Firstbank Puerto Rico  
PO Box 11856  
San Juan, PR 00910-3856

Island Finance  
PO Box 71504  
San Juan, PR 00936-8604

PRESTAMAS  
CONSUMER SERVICE CENTER  
BANKRUPTCY DIVISION-(CODE 248)  
PO BOX 9146 SAN JUAN PR, 00908-0146

Synch/Sams Club DC  
PO Box 965005  
Orlando, FL 32896-5005

Synch/Walmart  
PO Box 31293  
Salt Lake City, UT 84131-0293

ALEJANDRO OLIVERAS RIVERA  
ALEJANDRO OLIVERAS CHAPTER 13 TRUS  
PO BOX 9024062  
SAN JUAN, PR 00902-4062

MONSITA LECAROS ARIBAS  
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OCHOA BUILDING  
500 TANCA STREET SUITE 301  
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ROBERTO FIGUEROA CARRASQUILLO  
PO BOX 186  
CAGUAS, PR 00726-0186

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US TRUSTEES OFFICE  
PO BOX 9024003  
SAN JUAN, PR 00902-4003

ROSA DE LOS SANTOS POLANCO  
PMB 56 PO BOX 1283  
SAN LORENZO, PR 00754-1283

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(u)PRESTAMAS

End of Label Matrix	
Mailable recipients	15
Bypassed recipients	1
Total	16